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Date of Deposit: August 7, 2001

Attorney Docket No. 22058-516-DIV-CON

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

FIRST-NAMED INVENTOR: James Tobin

FOR: METHOD COMPRISING THE USE OF HUMAN INTERLEUKIN-11
RECEPTOR PROTEINS

Box PATENT APPLICATION

Assistant Commissioner for Patents
Washington, D.C. 20231

**REQUEST FOR FILING A CONTINUING PATENT APPLICATION
UNDER 37 C.F.R. §1.53(b)**

1. This is a request for filing a continuing application under 37 C.F.R. §1.53(b). This application claims priority to USSN 09/151,102 filed September 10, 1998, which in turn is a divisional patent application of USSN 08/929,846, filed September 15, 1997, which in turn is a divisional patent application of USSN 08/663,584, filed June 16, 1996, which in turn claims priority to USSN 08/362,304, filed December 22, 1994. Priority is claimed to all of these referenced applications.
2. This application is a total of 54 pages. This application includes:
 - 46 pages of specification (not including claims, abstract, or figures)
 - 7 pages of claims
 - 1 page of abstract
3. A copy of a signed combined Declaration/Power of Attorney submitted in parent application USSN 08/663,584 is included.
4. A copy of a Revocation/New Power of Attorney submitted in parent application USSN 09/151,102 is included.
5. Applicants request that a copy of the sequence listing in paper and computer readable form in parent application USSN 09/151,102 be made of record in the presently filed continuing application. A request for transferring the sequence is enclosed.
6. A preliminary amendment is enclosed.
7. Prior applications are assigned of record to Genetics Institute, 87 CambridgePark Drive, Cambridge, MA 02140.

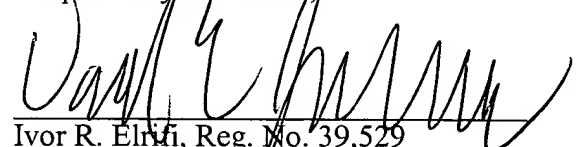
8. Fees associated with this application have been calculated as follows:

CLAIMS AS FILED					
Claims	Number Filed	Basic Fee Allowance	Number Extra	Rate	Basic Fee 37 C.F.R. 1.16(a) \$710.00
Total Claims (37 C.F.R. 1.16(c))	37	- 20 =	17	\$18.00	\$306.00
Independent Claims (37 C.F.R. 1.16(b))	2	- 3 =	0	\$80.00	\$0
Multiple Dependent Claim(s), if any (37 C.F.R. 1.16(d))	-0-			\$270.00	
				SUBTOTAL:	\$1,016.00
				TOTAL FEE:	\$1,016.00

9. A check (#9745) in the amount of **\$1,016.00** is enclosed. The Commissioner is authorized to charge any additional fees due, or credit overpayments, to Deposit Account No. 50-0311, Ref. No. 22058-516-DIV-CON.

10. A return receipt postcard is enclosed.

Respectfully submitted,



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Dated: August 7, 2001